

Complete and submit this form to make a public-records request. All fields must be completed with accurate information for your request to be processed.

Scope of request form

Requestor's contact information

This form is for requesting public records from the Alabama State Port Authority. If you are looking for public records from another governmental entity within the State of Alabama, you may wish to visit an online directory of <u>Alabama state agencies</u>, <u>Alabama municipalities</u>, or <u>Alabama counties</u> to find the entity best suited to assist you.

I believe the records I am seeking are in the possession of the Alabama State Port Authority rather than some other governmental entity within the State of Alabama.

Name:			
Phone number:			
Email address:			
Street address:		7. 1	
City:	State:	Zip code:	
Payment of fees			
Payment of fees may b	oe required before your requ	est is fulfilled. I am willing to pay	up to
§ in processing f	ees without prior notice by tl	ne agency.	
Specific records requ	ested		
Be as specific as possil	ole. Requests that are overly	broad may qualify as time-intens	ive
requests and will take	longer to process.		
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Signature		Date	